Dear colleague,

Subject: Minutes of round-table partner consultation on strengthening humanitarian response capacity – 29 January 2009

I would like to thank you for your attendance to the above round table as well as the earlier inputs you provided to our questionnaire.

I appreciated the open and frank discussions. There seemed to be a consensus on the need and substance of a capacity-building policy and the discussions will guide us in our further work. We will keep you informed.

Attached you will find a short report of the meeting, as well as the presentations provided by some of the speakers.

Please do not hesitate to contact Walter van Hattum directly in case you need any further information.

Johannes Luchner
1. MAIN CONCLUSIONS AND RECOMMENDATIONS

It is important to define capacity building in order to make it operational. A fairly recent DAC definition could be utilised in an amended form for the policy. The definition should also incorporate other dimensions of capacity building such as capabilities and competencies. The investments in Capacity Building (CB) should reflect different kinds of crises (slow and sudden onset, complex, protracted). When the humanitarian community is present for a longer period, there are more possibilities for local capacity building.

In response to the growing number of, especially, small-scale disasters, local capacity to engage in Disaster Risk Reduction and Disaster Preparedness requires more attention.

Regarding Local Capacity Building, communities play an important role and all agree they should be supported in this through funding, though not necessarily by DG ECHO. However, the CB policy should incorporate the need for DG ECHO partners to support local partners, for instance through providing guidance and conditions for support.

Similarly, local governments are often less politicised than at higher levels and should be involved in capacity building without undermining humanitarian principles. This does not necessarily mean through funding.

Capacity building is crucial for the Linking of Relief, Rehabilitation and Development (LRRD). DG ECHO will work on this issue with the other COM Services and was asked by participants to advocate strongly in favour of (local) capacity building by development partners.

Regarding (inclusiveness of) the humanitarian reform process, stakeholders argued for clearer separation of the humanitarian coordinator function from that of the resident coordinator. Clusters need to be sufficiently staffed and surge capacity should be shared among the clusters also including NGOs. Partners argued that cluster and UN capacities could be increased by giving more funding (more frequently and/or larger amounts) to NGOs who have relevant experience and expertise. To solve the global capacity gaps in humanitarian aid, the involvement of all actors, including NGOs, is necessary. NGOs themselves as well as the donor community should push for more involvement with the ongoing change processes.

It was proposed that DG ECHO should endeavour to link the Good Humanitarian Donorship initiative more closely to the humanitarian reform process. In addition, the new Council Working Party (COHAFA) should be used to facilitate increased donor coordination, through agreement on joint standards, needs assessments, etc.

Regarding sustainability, capacity building takes time: it is a process not limited to technical delivery, but also includes cultural processes, change management and linkages with other processes. Therefore, a long-term framework is necessary to allow sufficient time for successful capacity building. Best practice can be shared and include networks and associations in capacity-building efforts and innovative technologies. Effective capacity building can only be done in partnership.
2. QUESTIONNAIRE RESPONSES AND POLICY DIRECTIONS

Walter van Hattum (DG ECHO) presented the non-paper, which included the responses to the questionnaire. Even though not always 100% successful, it is worth investing in CB and negotiating to ensure it is done in the best possible manner. Different perceptions of CB exist, but for DG ECHO the main priority should be to save lives. CB can be seen at different levels and should ultimately target global humanitarian needs, rather than strengthening individual organisations. An overview was given of the policy considerations as outlined in the non-paper. These include: uncertainty; needs and demand-driven; focus; sustainability; local capacity; innovative approaches; measurability, and donor capacity. In its policy, DG ECHO will attempt a multi-donor approach.

Chris Cattaway (PM4NGOs) and Birgitte Stalder-Olsen (IFRC) emphasised the issue of coordination and the need to agree on funding principles. Walter van Hattum agreed and referred to the Humanitarian Consensus Action Plan which has led to regular discussions with other EU MS and non EU MS donors. This was supported by Stéphane Vandam (WHO) who said that coordination amongst donors had been key to building up the health cluster.

Marina Konovalova (UNHCR) and Floris Faber (Mission East) warned against excessive time spent on inefficient coordination, and felt that coordination efforts are most effective at the onset of an emergency, or on key management and logistics issues. Johannes Luchner (DG ECHO) argued that part of the coordination problem among donors is that we do not always share information, especially when it comes to logistical (military) capacity.

Concerning the extent to which DG ECHO can fund local capacity building directly, Johannes Luchner stated that DG ECHO cannot financially support national governments so needs to find appropriate channels for funding CB in problematic governance contexts. Furthermore, there is no capacity within DG ECHO to directly finance and monitor large numbers of local partners. Stéphane Vandam argued that local workers at field/district level were politically neutral and respected humanitarian principles more.

Nigel Timmins (Tearfund) and Steve McDonald (SCUK) raised the issue of indicators and measurability of CB: this should be done through social indicators. Jonathan Potter (People in Aid) highlighted the role of organisations such as People in Aid in providing support to the whole humanitarian system, encouraging the use of tools and benchmarks.

3. JOINT APPROACHES TO CAPACITY BUILDING

Jamie McGoldrick (OCHA) presented his vision for the cluster approach which was designed as a response to the findings of the Humanitarian Response Review. Clusters would improve performance and facilitate an inclusive approach. Evaluations show that the cluster approach is successful, and that the best-placed organisations are taking on the role of lead organisation. The next step is to invest more in involving local actors, since they will continue working after the international community leaves. In order to strategically invest in the CB of local actors, available local capacities should be mapped in relevant countries. Local capacity-building efforts should be more than lip service: too often responses are not adapted to the local context. Furthermore local capacity investment is vital, since natural disasters occur in some contexts on an annual basis, and
the number of disasters is growing. It is more efficient to build local capacity than increase the number of stand-by international workers. There is an essential need to improve accountability to beneficiaries and place greater trust in partners. Adhering to the Principles of Partnership will bring this behavioural change. The Good Humanitarian Donorship initiative is a good forum and should include new donors as well, whilst also focussing on the Humanitarian Reform Programme.

Yves Kim Créac'h (Merlin) presented on the cooperation between WHO and Merlin in Myanmar as co-cluster leads. This cooperation has been beneficial for both parties and enabled better delivery of humanitarian aid. WHO had the working relations with the government and Merlin had the operational capacity. The co-cluster lead arrangement led to a better working environment as well as improved communication. A further improvement would be to roll this out at district and local level. It is key to build capacity at district and local level, since people are less politicised at these levels. NGOs are encouraged to actively participate in the humanitarian reform process. Donors are also encouraged to push for more NGO participation in the humanitarian reform process, which could be achieved by increased funding for NGO participation in the process.

Steve McDonald (SCUK) stated that Save the Children is the permanent co-cluster lead of the education cluster and discusses with UNICEF joint rosters and resource-sharing. The education cluster is striving to make a substantial investment in local capacity, in order to have an increased rapid response capacity in the event of a disaster. Hubertus Rueffer (Deutsche Welthungerhilfe) highlighted the need to distinguish between different types of humanitarian crisis, because this determines the type of capacity building required. 80% of humanitarian crises are slow-onset, recurring or protracted crises. Birgitte Stadler-Olsen (IFRC) suggested that the humanitarian community advocate for increased investments in DRR and DP by speaking with a common voice and highlighting success stories.

Bhupinder Thomar (IFRC) stated IFRC’s view, that humanitarian reform is an inverted investment: The number of small to medium scale disasters is increasing, but the majority of capacity-building investments are going to international organisations at the peak of the response pyramid. Notwithstanding the importance of increasing capacity in general, it is more critical to increase capacity at the base of the response pyramid. Thus focus and investments should be shifted to this level. Kathrin Schick (VOICE) remarked that there is a need for a common stance by humanitarian and development actors on this issue, and that it is therefore good to see representatives of other Commission Services (DEV, AIDCO and RELEX). Hubertus Rueffer stressed the need to include governments in the coordination process. This worked very well in Mozambique in the 1990s. Many governments do not respect International Humanitarian Law, but others who do are not included in the coordination processes either. Johannes Luchner stated that he supported this notion, and has brought this up in recent discussions with EU MS. He posed the question, as to whether OCHA envisaged a leading role for including governments in the coordination process. This was affirmed by Jamie McGoldrick (OCHA).

4. LOCAL CAPACITY BUILDING

Birgitte Stadler-Olsen (IFRC) argued that vulnerable communities are the most affected by the frequency and complexity of natural disasters. There is a need to address this risk by using local - evidence-based - knowledge and innovation. In practice, this means investing in people and ensuring adequate follow-up; increasing investment in Disaster...
Risk Reduction; and ensuring linkages between coordination, advocacy and diplomacy (using the media effectively). The IFRC uses a bottom-up model for capacity development. This is based on the belief that it is crucial to invest most in supporting community level safety and resilience to disasters. The IFRC model includes two other levels: national-society preparedness and response capacity, and global surge capacity. There is a need to develop community safety and resilience in order to enable national-society and global level CB.

Hubertus Rueffer (Deutsche Welthungerhilfe) presented local CB as an increasingly important issue for DW: 55% of DW’s work is implemented by local partners. He argued that local humanitarian response capacity should be provided to and by many stakeholders and at all levels, including governments, non state actors and representatives of beneficiaries. Local staff (of INGOs) are also seen as change agents, for instance in Burma/Myanmar where DW provided training in project management skills to local staff, raising their awareness of humanitarian aid principles and encouraging trust. There is a tendency to ignore the efforts of governments and more cooperation here is necessary. Equally, representatives of the target group should be included in project design and implementation. There are still prejudices against local partners (i.e. they are targets of corruption and political pressures) which is incorrect since efficiency of projects implemented by NGOs is often higher than those implemented by INGOs. Local CB should therefore be the cornerstone of programme implementation, with beneficiaries being supported to build their own planning and implementation structures. Governments at all levels should play a coordinating role.

Johannes Luchner stated that working directly with government in local CB is beyond DG ECHO’s mandate. Geneviève Vercreux- Toussaint (ICRC) suggested DG ECHO could support ICRC and IFRC field programmes for CB (e.g. cooperation programme for assistance and protection). Jonathan Potter suggested the use of donor rotation schemes as established in the Philippines and Ethiopia. Nigel Timmins (Tearfund) and Bhupinder Thomar (IFRC) argued that local organisations only get funding at the peak of a crisis and since they are geographically limited, their activities cannot rely solely on funding peak after funding peak like international organisations. To maintain local capacity a substantial funding base and long term capacity building is required. Volker Hauck argued that this was only feasible if a donor developed its own assessment framework. Yves-Kim Créač’h agreed that whilst working directly with government and long-term programming is not in DG ECHO’s mandate, DG ECHO needs to recognise the related issues and therefore play an advocacy role to link up other actors and sources of funding. Ada van der Linde (Healthnet TPO) suggested that DG ECHO funding could come as a supplement to pre-existing systems and should have an evidence-based long-term impact. Floris Faber suggested that skills-based approaches funded by DG ECHO may be more sustainable. Walter van Hattum and Johannes Luchner wondered how DG ECHO could encourage its partners to promote CB with local partners (conditionality, guidelines, reference to existing policies). The key challenge is to combine local CB as a social-dynamic process with the need for donors to have concrete benchmarks, which assess the process and justify the expenditure of public funds.

5. SUSTAINABILITY

Volker Hauck (European Centre for Development Policy Management) observed that the ECDPM study Capacity, Change and Performance (2004 - 2008) emphasised the good CB performers and took an endogenous perspective – how capacity develops from
within. It focussed on different elements of capacity such as competency (mindsets, skills and motivations of individuals); capabilities (skills of a system to carry out a particular function or process); and capacity (overall ability of a system to perform and make a contribution). This definition has consequences for the approach within the organisation as well. Working from an endogenous perspective requires external interveners to capitalise on existing sources of capacity, to assess (actors') capacity, to work with local leaders, to communicate actively with national actors, to create incentives for local capacity development (e.g., through service contracts) and to stimulate partnerships with state actors. Capacity development is indispensable for implementing an LRRD policy. This needs to tackle such issues as getting local partners prepared and developing sustainable capacity for disaster preparedness, and will require DG ECHO to work closely together with the other COM Services. It is not possible to give a blueprint for building capacity. It is highly unpredictable and depends heavily on the specific context. CB can be based on certain principles, but a thorough analysis needs to be made beforehand. In this respect it is not advisable to restrict project formulation by establishing detailed funding criteria.

*Chris Cattaway (Project Management for NGOs - PM4NGOs)* argued that a lot of technologies exist that can be used for learning in the humanitarian aid community. Technology creates the possibility for learning irrespective of time and place. It is worth investing more in learning through technology. Otherwise the outcome will be the same as before. The argument that access to new technologies (internet) is limited does not really hold anymore.

*Graham Mackay (OXFAM GB) and Matt Bannerman (Emergency Capacity Building Project)* argued in favour of the system-wide and multi-agency approach of ECB (six major NGOs work together in this capacity-building project). The system-wide approach was chosen because isolated investment at field, organisation or sectoral levels of the system is not sustainable: it risks raising expectations and leads to frustration. The multi-agency approach pools investment, and results in higher quality tools and resources. Economies of scale enable delivery of learning opportunities closer to field staff and joint investment in human resources builds a common pool and thereby dilutes turnover risk. Indirect benefits are informal peer networks, improved coordination through shared understandings and better relationships. Benchmarking helps agencies track progress against the ‘industry average’.
STRENGTHENING HUMANITARIAN RESPONSE CAPACITY
CONSULTATION, 29 JANUARY 2009
BRUSSELS, Rue de la Loi 140, Charlemagne building, Sicco Mansholt Room (ground floor)
AGENDA

9.30 Welcome (coffee / tea)

10.00 Opening and Introduction - Johannes Luchner - Head of Unit DG ECHO 0/1

10.15 Questionnaire responses and Policy directions
10.15 - 10.30 Feedback of responses given
10.30 - 11.00 Discussion

11.00 Joint approaches to capacity building
11.00 - 11.15 UNOCHA - Jamie McGoldrick - Head of Humanitarian Coordination Support Section
11.15 - 11.30 Merlin - Yves-Kim Creach - Merlin Response Team Manager
11.30 - 12.10 Discussion

12.10 - 13.00 Lunch

13.00 Local Capacity Building
13.15 - 13.30 IFRC - Birgitte Stalder-Olsen - Deputy Director for Disaster Management
Bhupinder Thomar - Senior Officer - Disaster Preparedness

13.00 - 13.15 Deutsche Welthungerhilfe
13.30 - 14.10 Discussion

14.15 Sustainable Capacity building - critical success factors
14.15 - 14.30 ECDPM - Volker Hauck - Head of Knowledge Management

14.30 - 14.45 Coffee-break

14.45 - 15.00 Oxfam GB - Graham Mackay - Deputy Humanitarian Director
Emergency Capacity Building Project - Matt Bannerman - Project Director ECB
Project Management for NGOs - Chris Cettaway - Principal Advisor

15.00 - 15.30 Discussion

15.30 Wrap up session
15.30 - 16.00 Main conclusions and closure
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There may be a quiet consensus among operational agencies and donors that these objectives (building civil society, achieving sustainability and creating local ownership) are unlikely to be achieved. (ALNAP, 2004)

A process by which individuals, groups, institutions, organisations and, in effect, the international humanitarian community as a whole enhance abilities to identify and meet humanitarian needs in a timely, efficient and effective manner.
**RECOMMENDATIONS**

- Develop integrated policy
- Facilitate donor discussion
- Consult with partners
- Continue the programme (financing decision)
- Establish coordination mechanism

**POLICY CONSIDERATIONS**

- Uncertainty
- Needs and demand-driven
- Focus
- More than funding
- Sustainability
- Local Capacity
- Innovative approaches and mainstreaming
- Measurability
- Donor's capacity

**GAPS AND SPECIFIC RESPONSES IDENTIFIED BY PARTNERS (%)**

**ROLE OF DONORS:**

**INCLUSIVE HUMANITARIAN RESPONSE**

- Capacity Building to target an inclusive audience, including all major actors to have maximum impact.
- Promote effective coordination and cooperation, such as joint training, joint leadership, joint rosters, etc.

**ROLE OF DONORS:**

**LOCAL CAPACITY BUILDING**

- Priority for mitigating risk and responding to crisis.
- To provide support at the local level, including civil society and government.
- Cooperation and involvement of local partners with ECHO partners

**ROLE OF DONORS:**

**SUSTAINABILITY**

- Ensure local ownership
- Provide quality, longer term funding and project management
Cyclone Nargis struck Myanmar on 2 and 3 May 2008:
- 2.4 millions severely affected peoples,
- Death toll or missing estimated up to 130,000 persons
- The cluster coordination mechanism was activated within a week.
- The WHO Representative in Myanmar took responsibility as the Health Cluster lead.
- A member of WHO staff was appointed Health Cluster Coordinator.
- Merlin was proposed and appointed as Co-lead for the Health Cluster.

**Facilitation and coordination of the health sector**
- Health Information collection, analysis and dissemination.
- Emergency disease surveillance and early warning for epidemic prone diseases.
- Responses to health threats and disease outbreaks
- Provide reference and technical advisor for public health matters.
- Identification and resolution of gaps in the health sector.
- Priority setting and minimum package identified.
- Capacity building of governmental and non-government groups.
- Facilitated linkages between MoH and Cluster partners.
- Responsibility for technical inputs to PONJA, Periodic Review.
- Overview: Early Recovery/Recovery Strategic Framework (PONREPP) for the health section.
- Responsible for contributing to accountability framework (IMM/Financial Tracking System).

**Who funds it?**
- Merlin has received specific funds from its donors to ensure that cost associated would be covered

**What are the benefits?**
- Cluster approach is meant to be participative, to enable a non UN lead approach the co-leadership model gives greater influence for NGO to ensure adequacy of the cluster response.
- It creates a better working environment as well as communication between stakeholders.
**What are the benefits?**

- A more effective and harmonized approach of health services delivery
- A greater access to the MoH for NGO through the health cluster
- Strategic level of discussion (i.e. not limited to information sharing)
- Development of useful technical tools and guidelines
- Effective meeting management, including efforts to engage local actors
- Reduce problems related to frequent cluster lead turnover and the shared workload afforded cluster leads the possibility of spending more time in the field.

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**What was missing?**

- The rolling out of the model from capital to field level
- Mainstreaming attendance of decision-maker at the cluster meeting
- A better communication especially field/capital and vice versa
- Support from Global Cluster
- A better analysis of 3W for an improved gap analysis
- A joint assessment methodology
- A data analysis based upon population data
- A comprehensive preparedness and contingency planning
- A proper plan for capacity building, especially for the national health authorities and non-government group

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**The Humanitarian Reform**

- Funding has been provided to UN to undertake the reform but not to the INGOs
- Quality of UN Cluster Coordinators is very variable in quality with no consistency
- Roster mechanism to deploy cluster coordinators is not functioning, (e.g. in Myanmar a total of 46 cluster coordinators were deployed during the first six months...)
- Capacity building and roll out of the cluster from capital to field in a timely fashion is still missing
- Information management per cluster remain an issue
- RC/HC positions are often not split
- Cluster roll out is very much dependant on the RC/HC (e.g. Georgia)
- Delivery as one remain for the UN an issue where exist an integrated mission.

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**Conclusion - Recommendations**

**To the NGOs:**

- Participate in leading the clusters and not let UN by themselves
- Provide staff to the various existing roster of cluster coordinators
- Second staff to clusters coordination teams
- Provide staff to the Humanitarian Coordinator roster
- Ensure capacity building of national stakeholders
- Recognize relevance, importance and utility of Cluster approach and ensure that staff of sufficient seniority participate in Cluster in order to maximize shared benefits

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**To the UN:**

- Move faster in the implementation of the Humanitarian Reform
- Ensure that UN agencies are fully committed including in terms of provision of organizational support at a Country, Regional and Global level
- Ensure that clusters coordinators are qualified for the job
- Ensure that clusters are staff adequately, (e.g. Cluster coordinator, information manager, GIS, etc.)
- Ensure that roster for emergency response are established with the mechanism to activate them
- Ensure that OCHA Staff in charge of cluster lead coordination have sufficient strategic thinking skills
- Address issue of coordination and leadership when an integrated mission exist and respect humanitarian space and principles
- Ensure that tools and guidance are provided to people implementing the cluster from global level

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**To the Donors:**

- Provide NGOs with Core Funding to enable them to actively engage in the support of the humanitarian reform (At least 30% of the funds provided to UN for the humanitarian reform should go to NGOs)
- Push for a greater influence of NGO in humanitarian response such as seconding a senior NGO humanitarian advisor to the HC office
- Push for INGOs to enter the roster for Humanitarian Coordinator
- Support initiatives that tend to harmonize humanitarian responses such as Common Needs Assessment, for better planning and response purposes
- Provides adequate funds in a timely manner to ensure sufficient staff will be deployed for the full implementation of the cluster approach from capital to the field
Conclusion - Recommendations

To all:

- Ensure that capacity building of national stakeholders (Civil society, national NGOs, national authorities, etc.) remains a priority even at the onset of the response and that donors provide sufficient funds for it.
Vulnerable communities will be more affected by:

- Frequency, complexity of natural disaster
- Risk exacerbated by climate change
- Lack of solutions and funding for slow onset disasters
- Increase in local small scale disasters
- Migration to poorly planned mega cities
- Minimal access to health services
- Minimal access to water / sanitation
- Continuing exposure to HIV/AIDS

Addressing gaps: local - global - local

- Need for evidence based knowledge and innovation: invest in research, evaluations and pilot projects
- Invest in people: need for continuous recruitment, training and follow-up (staff/volunteers)
- Increased investment in Disaster Risk Reduction: framework for safety & resilience, DRM for imminent crisis, DWA
- Coordinated approaches to and completion of vulnerability analysis and needs assessment
- Linking operations, communication and humanitarian advocacy/diplomacy: "Talk as we work, and walk as we talk"

Capacity development: A bottom up model

Disaster Management: 2009-11 Operational Strategy

- Purpose
  A high level strategy for DM which reinforces:
  - A well-integrated approach
  - Ensures focus
  - Provides leadership direction
  - Continues implementation of the New Operating Model
  - Provides foundation for DM inputs to various planning and fundraising processes
Disaster Management: 2009-11 Operational Strategy

A framework that recognizes five key factors:

- DM is an integrated endeavour, including sectors such as public health, water and sanitation, shelter, livelihoods and food security
- Growing need for preparedness, response and recovery services due to land-use, migration and climate change induced vulnerability
- Growing DM capacity needs among NSs
- Simultaneously invest in Red Cross/Red Crescent rapid response capacity and community preparedness and risk reduction
- Increased Secretariat services emphasis on coordination, DREF, quality, accountability and integrated DM technical support

Disaster Management: 2009-11 Operational Strategy

A framework that will achieve the objectives:

- Increased integration between policy and practice and expanded advocacy to reduce disaster risks and impact
- Strengthen DM technical assistance to National Societies
- Prioritize Secretariat DM services on coordination, information management and analysis
- Develop competency-based DM staff for improved surge capacity and technical assistance to membership
- Strengthen DM tools, systems and analysis for cross sector integration

Our Investment in Local Capacity Development

Safer and Resilient Communities

- Tsunami Recovery Programme: 6,500 communities in 4 countries
- Global Alliance: 20 countries, 10 Million CHF annually
- Food Security: 10 Mio CHF annually in Africa
- New Food Security Initiative: 9 Mio CHF, 2.3 Mio in 15 countries annually
- 154 national societies implementing Disaster Risk Reduction activities

Strengthening National Society Preparedness

- Annual Appeal 2009-2010: 23 Mio CHF
- Well Prepared National Society Survey, 2008-2010 Societies
- HQ response capacity: (10 excellent, 34 good, 34 average and 3 poor)
- Branch Response Teams - 10
- Pre-positioned stocks - 49
- Warehousing capacity - 31

Sectorial Plans: their focus in 2009/10

- The Disaster Response Tools plan focuses on coordination, information management and analysis, enabling innovation and adaptation through existing platforms (DMIS) and tools. It focuses on improving existing surge capacity such as HORT, FACT, BOS.

- The Shelter plan focuses on developing best practices and policies in building; on building the human resource capacity of NSs; on ensuring the technical support for shelter response; and networking to the emergency shelter sector.

- The Logistics plan focuses on developing best practices and policies in logistics; on building the human resource capacity of NSs; and on ensuring the logistics services for National Society (NS) programmes and operations through the central structures.

Sectorial Plans: their focus in 2009/10

- The NRHL plan focuses on providing technical assistance to governments on implementing the NRHL Guidelines, on building the capacity of NSs, international federation staff and humanitarian partners to promote and use the Guidelines, and on disseminating and promoting the NRHL Guidelines and related instruments with governments, humanitarian partners and international organizations as well as fostering new collaborative research on domestic legislative issues.

- The I/T/Telecom plan focuses on enhancing the role of IFRC and NSs in disaster response through developing and implementing appropriate technology, and on developing human resources skills to manage both new and existing technologies.
To improve the lives of vulnerable people by mobilizing the power of humanity.

Capacity building efforts in support of the global humanitarian agenda.
UNICEF publication.
Volume 21, January 2000.
Strengthening humanitarian response capacity
ECHO Roundtable
Local Capacity Building
Brussels, 29th January 2009

Local human response capacity provided by:
Governments on all levels (local, province, central)
Community based organizations
Non Governmental Organizations,
Other Local and Non State actors
Representatives of beneficiaries (Community Initiative Groups)
Local staff (Int. NGOs)

Role of local actors in humanitarian response
Without local capacities and actors any project implementation (including humanitarian response) is impossible (partners and local authorities).
(WHH: ca. 100 partner NGOs, 65% of project implementation capacity, 2500 local staff).

Myanmar: using local capacities, WHH response to the cyclone Nargiz was possible within 48 h after the cyclone.
Availability of fast response using local capacities – 24-48 h after the event Using external capacities – more than 1 week in average

Field Experience
Four elements of local capacity building
1) Support to local NGOs as Project Partners – project embedded training
2) Involvement of Representatives of the target group into project planning and implementation (here: Community Initiative Groups)
3) Cooperation with State actors (Governments on all levels) as bottleneck of capacities and acceptances
4) Local staff as the multiplier and "Change Agents" of projects and initiators for local NGO structure building

Presumptions against local partners
Local partners are target of political pressure and corruption and unreliable in general.
Local partners are not following the European administrative standards, hence they cannot be funded directly.
Local NGOs as humanitarian actors are seen as competitors of INGOs with relevant consequences. "I, the expatriate, am a highly educated professional. Can a local specialist perform at the same level as I do?"
But:
The efficiency of project implementation (especially in complex environments) by local NGO is often higher than of INGOs

Food for thoughts:
Local capacity building is needed and desirable, but:
- How to protect local NGOs andother local capacities?
- ALNAP stresses the wish of NGOs for freedom of decision and action, local capacities might put some more limitations on this.
- Few disasters and crises are short and simple standing, many are protracted and repeating, how do we consider this? (DRR, Cluster approach, role of the IAAC)
- Local Governments have different agendas, which are sometimes difficult to understand, do we collect enough information, how can we by in cooperation?
- What is the advantage of cooperation between INGOs. Often an ignorant attitude toward the local Governments?
- In many projects there is intended and unintended capacity building for the NGO. Are we interested what it is and how is it necessary? What are the NGOs leave, these capacities are when not - double staff coordination
Crucial issues/requests

- Progress happens only if local capacity providers carry a full and final responsibility, training alone without practical steps does not produce results.
- Local capacity building should be a cornerstone of programmes implementation from the very beginning of every humanitarian intervention.
- A performance scheme for local NGOs should be introduced (Capabilities, experience, references etc) and funding be opted for the best performers, including mentoring.
- Meetings and conferences of the International Community should be open to local representatives if needed in a language in which they are able to communicate.
- Governments on all levels should be encouraged to play an active or even steering role in coordination (no “backstage” meetings or “weakling” meetings of the IC).
- Beneficiaries should be supported to build core structures for planning and later implementing project activities (GRiO).
Sustainable Capacity Building –
critical success factors

Strengthening Humanitarian Response Capacity,
Consultation, Brussels, 29 January 2009
Volker Hauck, ECDPM

Outline
- Intro/ Point of departure
- Understanding of capacity and capacity development
- Highlighting selected findings from recent research on Capacity, Change and Performance
- Implications for policy and practice

Intro/ Point of departure
- Feeding into discussion raised by the ECHO informal non-paper:
  - Strategic considerations: issues of sustainability and local capacity
  - Partner consultations: Role of donors – building local capacity & increasing sustainability
- What to learn from int. policy discussion on CD for humanitarian assistance?

Definitions and concepts
- ECHO: "CB is a process by which individuals, groups, institutions, organisations and, in effect, the int. humanitarian community as a whole enhance their abilities to identify and meet humanitarian needs in a timely, efficient and effective manner (→ CIDA, 1996).
- OECD/ DAC: "CD is the process whereby people, organisations and society as a whole unleash, strengthen, create, adapt and maintain capacity over time". (2006).
- PD (2005) & AAA (2008): "Developing countries will strengthen their capacity to lead and manage development. - CD is the responsibility of developing countries, with donors playing a supportive role."

Relevance for humanitarian assistance?
- A tall order:
  - Pressures to deliver and report in time ...
  - To show tangible results ...
  - In need of implementers with capacity ...
  - Local partners/local capacity – ? – ("we can’t wait") ...
  - Etc.
- Yet, indispensable for implementing LRRD policy:
  - How to bridge relief, rehabilitation and development?
  - How to get local partners prepared to take on?
  - How to develop sustainable capacity for disaster preparedness?
  - Etc.
A different lens to look at capacity & CD

- Study on Capacity, Change and Performance - ECDPM (2004 to 2008)
  - Emphasis on good performers
  - Taking an endogenous perspective - how capacity develops from within
  - No exclusive focus on international dev. cooperation
  - 16 case studies, 7 theme papers, bibliography, final report and policy management brief
  - Multi donor and multi country support
  - Context: past and ongoing development and aid effectiveness discussions (Rome; PD; AAA)

Key capacity questions

- How to understand capacity?
- How to deal with the complexities and uncertainty of capacity issues?
- How and why does change happen?
- How does capacity develop from within?
- How does capacity translate into performance?

A systems perspective/ CAS

How to understand capacity?

- OECD/ DAC: "Capacity is the ability of people, organisations and society as a whole to manage their affairs successfully."
- Capacity = outcome
- Capacity development = a process
- Support to CD = the contribution of external actors to country processes

What are the elements of capacity?

5 core capabilities

- To commit and engage – empowerment, motivation, attitude, confidence
- To carry out technical, service delivery and logistical tasks – core functions directed at implementation of mandated goals
- To relate and attract – manage relationships, mobilise resources, network, protect space
- To adapt and self-renew – learn, strategise, re-position & to manage change
- To balance diversity and coherence – control fragmentation, manage complexity and stability, balance the mix of capabilities
6 core capabilities: operational relevance

- An understanding of capacity which goes beyond the technical and functional
- A complementary lens for exploring organisational and system capacity (in addition to a focus on what is lacking)
- A tool to diagnose strengths and weaknesses
- A framework to develop capabilities required to address capacity issues
- A framework to monitor change over time

Implications for strengthening human response capacity (1)

- No easy answers/ no blueprints for CD
- Widen understanding of capacity building/ CD beyond 'delivery' of humanitarian response
- Be aware of CD 'dilemma's':
  - service delivery vs. sustainable development;
  - quick implementation channels vs. (local) public service capacity;
  - provision of technical capacity vs. support to change processes
- Dilemma's require different response strategies (resources, timeframes, dealing with power and politics, incentives, ...)

Implications for strengthening human response capacity (2)

- In-depth knowledge of local/ regional context; and when and where CD approaches can be followed, or not/ rather cautiously (e.g. fragile states vs. natural disaster contexts)
- Provide support to individuals, organisations, wider system/ institutions and networks/ constellations of actors
- Strengthen centre, sub-national and local response capacity
- Support to CD = > than 'training'

Implications for strengthening human response capacity (3)

- Integrate past learning on CD into LRRD policy; invest in disaster preparedness, early warning from a CD angle
- Apply an 'endogenous' perspective to CD:
  - Capitalise on existing sources of capacity
  - Who are the actors/ assess capacity
  - Work with local leaders
  - Communicate actively with national actors
  - Create incentives for local capacity development (e.g., through service contracts)
  - Stimulate partnerships with state actors

Implications for strengthening human response capacity (4)

- External supporters (donors/ INGOs): Clarify understanding of CD and translate it into operational guidance & reforms
- A need for competent capacity builders, with (technical) ability and mentality to fit the job
- Adapt funding instruments, make them more flexible and responsive to local contexts, needs and demands
- Go for harmonised/ complementary approaches
When is capacity building not sustainable? DEMAND and SUPPLY factors...

- Lack of agreed standards/terminology
- Focus on technical skills vs. broader competencies
- High turnover means staff "fall off" the learning curve
- Lack of opportunities to use acquired knowledge
- Short term funding of capacity building (a contradiction?)
- Focus on workshop/class room teaching

- Improve access to learning opportunities
- Use experiential learning, simulations and OTJL
- Recognize skills and promote career structure
- Understand and support by country leadership
- Develop competencies that fit with org needs
- Ensure staff turnover is managed for careers
- Provide "business case" for internal investment
- Develop common terminology and standards
- Build pool of professional, competent staff
- Demonstrate value for donor investment

Isolated investment in any one of these levels of the system will not be sustainable – risks raising expectations and leading to frustration.

Multi-agency approaches leverage investment and provide additional benefits:

Direct
- Higher quality tools and resources through pooled investment e.g. ESUS
- Economies of scale enable delivery of learning opportunity closer to field staff
- More investment builds pool and dilutes turnover risk

Indirect
- Informed peer networks
- Improved coordination follows shared understandings and better relationships: learning together = working together
- Benchmarking helps agencies track progress against "industry average"

And go beyond trend measurement.

www.misproject.org www.strategies.org